

ATTORNEY OR PARTY WITHOUT ATTORNEY <i>(Name, address and telephone #)</i> : STATE BAR NO: ATTORNEY FOR <i>(Name)</i> : SUPERIOR COURT OF CALIFORNIA, COUNTY OF MARIN 3501 Civic Center Drive P. O. Box 4988 San Rafael, CA 94913-4988	FOR COURT USE ONLY
APPELLANT: Name: _____ Address: _____ _____ S.S. # ____ - ____ - ____ DL # _____ ISSUING AGENCY: _____	
NOTICE OF APPEAL PARKING	CASE NUMBER: _____

As the appellant in the above entitled action, I hereby appeal the final administrative decision on parking citation number _____ which was originally issued by the above agency on _____ 20_____.

The hearing was: ☐ Personal Conference
☐ Decision rendered by Mail

Date of mailing of final decision by issuing agency: _____ 20_____.

MANDATORY REQUIREMENTS

- This *Notice of Appeal* must be filed with the Court *within 30 days* after the mailing of the final decision by the issuing agency;
- A filing fee of \$25.00 **must** be deposited with the Court at the time of filing;
- No later than *10 days prior* to the de novo hearing (see date below), you must file with this Court proof of service that the issuing agency was served this *Notice Of Appeal*; and
- Failure to comply with each of these requirements may result in the dismissal of your appeal or denial of a de novo hearing**

Date: _____ 20_____

→ _____
Signature of Appellant

A hearing will be conducted at the Marin County Superior Court, Civic Center - Hall of Justice, San Rafael, California, on the date and time indicated below.

DATE	TIME
	AM/PM

John P. Montgomery,
Court Executive Officer

Date: _____ 20_____

By _____
Deputy